



**MEMORANDUM**



**DATE:** November 5, 2007

**TO:** Bargaining Unit 6 Employees Impacted by Cancellation of Union-Sponsored Dental and Vision Benefits

**FROM:** **Department of Personnel Administration  
Benefits Division**

**SUBJECT:** Important Notice  
Cancellation of Your Union-Sponsored Dental and Vision Benefits

The Department of Personnel Administration (DPA) has been informed by the California Correctional Peace Officers Association (CCPOA) Benefit Trust that your dental and/or vision benefit coverage through the CCPOA Trust Fund has been terminated effective October 31, 2007.

To ensure that you have no lapse in vision benefit coverage, you will be automatically enrolled in the State-sponsored vision benefit provided by Vision Service Plan (VSP) effective November 1, 2007. The State will pay 100% of the monthly vision premium. There are differences in this new coverage. Please contact VSP at 1-800-877-7195 if you have questions regarding the differences.

To ensure that you have uninterrupted access to dental coverage, DPA in coordination with the State Controller's Office (SCO), CDCR and the Department of Mental Health, will be conducting a Special Dental Open Enrollment for impacted Unit 6 employees. The Special Dental Open Enrollment Period will be held from November 13 through November 30, 2007. Your enrollment into the selected State-sponsored plan will be retroactively effective to November 1, 2007. During this open enrollment you can elect to enroll in one of the four dental plans offered by the State by completing a Dental Plan Enrollment Authorization form (STD. 692) and submitting it to your personnel office. Please contact your personnel office to obtain a STD. 692.

**DENTAL EMERGENCIES**

If you or your eligible dependents need urgent dental care, please call Delta Dental at (800) 228-0513. Delta Dental will assist you with immediate enrollment into their Delta Dental Premier Basic dental plan effective November 1, 2007, and contact your dentist to notify him/her of your dental coverage.

If Delta enrolls you into the Delta Dental Premier Basic dental plan as a result of your phone call, it will not be necessary for you to complete a Dental Plan Enrollment Authorization form (STD. 692) during the Special Dental Enrollment Period, unless you want to change dental plans.

## **STATE-SPONSORED DENTAL BENEFITS**

Your State-sponsored dental plan options and the premiums are attached. Contact your Personnel Office for a brochure, list of participating dentists and cost comparison, or call the dental plans at the numbers provided below. You may also obtain brochures and listings of participating dentists by accessing each plan's Web site listed below.

To help you decide which dental plan to enroll in, we have attached a summary of your State-sponsored dental plan choices and a benefit cost comparison. If you do not enroll into a State-sponsored dental plan by completing a Dental Plan Enrollment Authorization form (STD. 692) and submitting it to your personnel office during the Special Open Enrollment Period, your next opportunity to enroll will be during the fall 2008 Open Enrollment Period.

### **Delta Dental Plans**

Delta Premier and Delta Preferred Provider Option (PPO) 1-800-225-3368  
[www.deltadentalca.org/state](http://www.deltadentalca.org/state)

### **Prepaid Dental Plans**

DeltaCare USA 1-800-422-4234  
[www.deltadentalca.org](http://www.deltadentalca.org)

SafeGuard Dental Plan 1-800-880-1800  
[www.safeguard.net](http://www.safeguard.net)

The attached charts show the dental premiums that are currently in effect for 2007 and the new dental premiums that go into effect January 1, 2008.

To learn more about the State-sponsored dental benefits or for questions regarding this Special Dental Open Enrollment Period, please contact your Personnel Office. You may also visit DPA's Web site at [www.dpa.ca.gov](http://www.dpa.ca.gov) (click on Benefits).

Attachments

## State Sponsored Dental Plan Premiums 2007 Rates

### Delta Dental Premier Basic Plan for Represented Employees:

| Coverage                             | Employee Share |
|--------------------------------------|----------------|
| Employee only                        | \$11.74        |
| Employee plus one dependent          | \$20.68        |
| Employee plus two or more dependents | \$30.00        |

### Delta Dental Preferred Provider Option (PPO):

| Coverage                             | Employee Share |
|--------------------------------------|----------------|
| Employee only                        | \$10.12        |
| Employee plus one dependent          | \$19.86        |
| Employee plus two or more dependents | \$29.97        |

### Prepaid Dental Plan:

If you enroll in one of the States prepaid dental plans, the State will pay 100 percent of the premium.

| Coverage                             | SafeGuard Standard | DeltaCare USA |
|--------------------------------------|--------------------|---------------|
| Employee only                        | \$0.00             | \$0.00        |
| Employee plus one dependent          | \$0.00             | \$0.00        |
| Employee plus two or more dependents | \$0.00             | \$0.00        |

## State Sponsored Dental Plan Premiums 2008 Rates

### Delta Dental Premier Basic Plan for Represented Employees:

| <b>Coverage</b>                      | <b>Employee Share</b> |
|--------------------------------------|-----------------------|
| Employee only                        | \$12.02               |
| Employee plus one dependent          | \$21.28               |
| Employee plus two or more dependents | \$30.94               |

### Delta Dental Preferred Provider Option (PPO):

| <b>Coverage</b>                      | <b>Employee Share</b> |
|--------------------------------------|-----------------------|
| Employee only                        | \$10.22               |
| Employee plus one dependent          | \$20.16               |
| Employee plus two or more dependents | \$30.50               |

### Prepaid Dental Plan Premiums:

If you enroll in one of the States prepaid dental plans, the State will pay 100 percent of the premium.

| <b>Coverage</b>                      | <b>SafeGuard Standard</b> | <b>DeltaCare USA</b> |
|--------------------------------------|---------------------------|----------------------|
| Employee only                        | \$0.00                    | \$0.00               |
| Employee plus one dependent          | \$0.00                    | \$0.00               |
| Employee plus two or more dependents | \$0.00                    | \$0.00               |

## **Your Dental Plan Options**

### **Prepaid Plans**

DeltaCare USA and SafeGuard

Prepaid plans provide services through member dentists throughout California. (These plans are not available outside of California.)

Monthly premiums are fully paid by the State. You have no monthly premiums, deductibles, or maximum annual benefit limits. Many services are provided at low or no cost to you. You may change dentists upon request and/or change plans if you move and your plan is no longer available. If you need emergency dental work and are outside of your service area (50 miles from your residence), you may go to any dentist for the relief of pain and be reimbursed up to \$400 per calendar year. For more information or a list of member dentists, contact the plans at: DeltaCare USA 1-800-422-4234, or visit [www.deltadentalca.org](http://www.deltadentalca.org) and SafeGuard 1-800-880-1800 or visit [www.safeguard.net](http://www.safeguard.net).

### **Indemnity Plan**

Delta Dental Premier - Group #9949

Delta Premier features full access to specialty care and guaranteed benefits through member dentists. However, you can see any dentist worldwide and still be covered, although your out-of-pocket costs may be higher. For more information, contact Delta Dental at 1-800-225-3368 or visit [www.deltadentalca.org/state](http://www.deltadentalca.org/state).

### **Preferred Provider Option Plan**

Delta Dental Preferred Provider Option (PPO) - Group #9946

Delta Preferred Provider Option (PPO) provides services through its network of participating dentists, although you may use non-PPO dentists worldwide. If you receive services outside of the PPO network, your out-of-pocket costs will be substantially higher. Please note that not all Delta Premier dentists are members of the PPO network; however, you can see the Delta dentist of your choice and still be covered.

As a reminder of certain advantages in being enrolled in the PPO dental plan, your treatment costs are based on a discounted fee agreement between Delta and the PPO provider. This fee agreement will result in lower out-of-pocket costs to you when you visit a PPO network dentist. Additionally, for rank and file employees, the annual maximum benefit available to dependents is \$2,000 when using a dentist who's a member of the PPO network, compared to a \$1,000 yearly maximum under Delta Premier. PPO offers a \$2,500 lifetime benefit for dental implants and a third cleaning for high-risk patients. Generally, high-risk patients include pregnant women, cancer chemotherapy patients, and persons with compromising systemic diseases such as diabetes, AIDS, or endocarditis, and persons who have had organ transplants. Your present dentist may be a PPO provider so you may want to change your coverage to the PPO to take advantage of this richer benefit.

For more information, contact Delta Dental at 1-800-225-3368 or visit [www.deltadentalca.org/state](http://www.deltadentalca.org/state).

These are brief descriptions of the available dental plans. Please consult each plan's "Evidence of Coverage" brochure or call the plan for a more detailed explanation. You may also obtain brochures and listings of participating dentists by accessing each plan's Web site at the addresses listed above.

## State-Sponsored Dental Plans Benefit Cost Comparison

The following chart provides a comparison of your costs for certain types of procedures. Please consult each dental plan's Evidence of Coverage brochure for detailed information and plan limitations.

| For these procedures:  | Delta Dental   |                                       |   | SafeGuard DeltaCare USA                     |
|--|--|---------------------------------------|---|---|
|  | Premier Basic  |                                       | **Preferred Provider Option (PPO)   | Standard                                    |
|  | Rank and File Employees  | Dependents of Rank and File Employees | Rank and File Employees and Dependents  | Rank and File Employees and Dependents      |
| Diagnostic and Preventive Benefits (Two cleanings per 12 month period) * | 0  | 0                                     | 0   | 0   |
| Basic Benefits (Usual, Customary, and Reasonable)                        | 10%  | 20%                                   | 10%   | 0   |
| Crowns   | 20%  | 50%                                   | 20%   | \$50  |
| Bridges, Full & Partial Dentures   | 50%  | 50%                                   | 40%   | \$65 and up                                 |
| Annual Deductible  | \$50*  | \$50*                                 | \$25*   | No deductible                               |
| Maximum Deductible   | \$150 per family   |                                       | \$100 per family  | N/A   |
| Orthodontia  | Delta will pay 50% up to a lifetime maximum of \$1,000 per person. |                                       | Delta will pay 50% up to a lifetime maximum of \$1,000 per adult and pay 50% up to a lifetime maximum of \$1,500 per child. | \$1,000 plus up to \$250 for start-up costs |
| Annual Maximum   | \$2,000  | \$1,000                               | \$2,000   | No Maximum                                  |

\* Diagnostic and Preventive Benefits are exempt from the deductible.

\*\* The level of benefits and covered services reflected in the chart are based on services provided by a PPO Network dentist. The level of benefits and covered services provided by a non-PPO dentist are lower. Additionally, the PPO includes up to a \$2,500 lifetime benefit for dental implants and a 3rd cleaning for high-risk patients. High-risk patients include: pregnant women, cancer chemotherapy patients, and persons with compromising systemic diseases such as AIDS, diabetes, endocarditis, or persons who have had organ transplants.